PTO/SB/22 (09-06)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)		
FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			094	1-0418P	
Application Number 10/087,774-Conf. #8816			Filed March 5, 2002		
For OSD CONTROL METHOD AND OSD PROCESSING DEVICE (as amended)					
Art Unit 26	22		Examiner	B. P. Ye	nke
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
[V] 0		Fee	Small Entity Fee	_	100.00
	month (37 CFR 1.17(a)(1))	\$120	\$60	\$	120.00
	months (37 CFR 1.17(a)(2))	\$450	\$225	\$	
Thre	ee months (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
Four	r months (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five	months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.					
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
X The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.					
I am the applicant/inventor					
application vertex.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
x	attorney or agent of record. Re	egistration Number	32,334		6
	attorney or agent under 37 CFI	R 1.34.			
Registration number if acting under 37 CFR 1.34					
Signature Date					
Joe McKinney Muncy Typed or printed name			(703) 205-8026 Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of 1 forms are submitted.					
Total of	i forms are submi	med.			

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